Updated: 10/18/2019

ASO Transition FAQs

1. Where is information about the Maryland Medicaid Behavioral Health Administrative Service Organization (ASO) contract award available?

Answer: The Board of Public Works posted information about the award to the new vendor during their July, 2019 meeting. Attached is a link to the video associated with the award: https://governor.maryland.gov/board-of-public-works-meetings/

2. What is changing in regards to the ASO transition and what is staying the same?

Answer: All providers must register with Optum through their portal which will be available soon. The Optum system is currently being built and while it will be different from Beacon's system, but the overall structure, including the provider portal, will be similar. The Department will get the information to providers as soon as possible regarding registering with Optum.

The registration process (not to be confused with the enrollment process) will make you "known" to the Optum system as an active provider. Existing authorizations will transfer to Optum but providers still need to register in Optum to continue their authorizations and to submit claims for payment. This is also your opportunity to make sure that your primary contact email for your program or office, your enrollment, group affiliation, etc. are up to date. Failure to register in the Optum system will result in a provider not receiving payment.

The change in ASO should be transparent to providers and consumers. All program regulations remain the same.

3. Will the transition cause delays in claims processing and payment, particularly those billed through a clearinghouse?

Answer: No. Optum will be launching their provider portal which will include options for both clearinghouse and direct claims submission. Once MDH overall testing of the system is complete, providers will be able to test their clearinghouse and claims submission. More information from Optum will be forthcoming in November.

4. When will training regarding Optum's provider registration process, obtaining authorization, and claims submission become available?

Answer: As Optum continues to hire essential staff, Optum will offer provider training, which will be communicated through Beacon's currently existing Provider Alert system as well as posted on the MDH transition link. Both in-person and webinar training opportunities will be available. Information that will include key dates for specific provider types will be sent by the end of October.

5. How and when will claims and authorizations be transferred to the new ASO?

Answer: Initial authorizations and claims files have already transferred to Optum for history and for current processing. These files will continue to be transferred in updated increments to ensure all open authorizations are captured prior to go-live.

6. When will training be made available for the Optum OMS platform?

Answer: Training information will be conveyed to providers through the Beacon Provider Alert system and on the MDH transition website as soon as it is available at the end of October.

7. How will uninsured spans be affected by the transition?

Answer: Uninsured span will not be affected. Optum has already received and will continue to receive the open authorization file which includes uninsured spans.

8. When will providers be able to conduct claims testing using Optum's system?

Answer: Optum will make arrangements for testing batch files and direct claims submission prior to the launch. More information will be available in November, when Optum will send providers a request with all necessary information to submit for testing.

9. Is registering with Optum the same as signing a contract to participate as a Maryland Medicaid provider?

Answer: No. The provider credentialing and enrollment process will remain the same. Maryland reimburses behavioral health services under its fee for service model. This means that participating providers are those that are licensed, certified and qualified to enroll with Medicaid. That process includes a provider agreement and attestation that providers will comply with all relevant COMAR regulations. See COMAR 10.09.36 for general participating provider requirements. Registering with Optum will require providers to enter your provider/program information into Optum's provider portal. This registration process "turns on" the actively participating provider and allows providers to obtain authorizations and submit claims payment. Failure to register in the Optum system will result in a provider not receiving payment. Authorization rules apply to all behavioral health services (COMAR 10.09.59.08).